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<i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		Complete if Known	
FEETRANSMITTAL		Application Number	10/562,062-Conf. #9642
For FY 2009		Filing Date	March 22, 2007
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Seung June SONG
TOTAL AMOUNT OF PAYMENT (\$ 715.00)		Examiner Name	R. Hsu
		Art Unit	3714
		Attorney Docket No.	4466-0103PUS1

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION																			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																			
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES														
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)												
Utility	330	165	540	270	220	110	_____												
Design	220	110	100	50	140	70	_____												
Plant	220	110	330	165	170	85	_____												
Reissue	330	165	540	270	650	325	_____												
Provisional	220	110	0	0	0	0	_____												
2. EXCESS CLAIM FEES																			
Fee Description <table border="1" style="float: right; margin-right: 20px;"> <tr> <td>Fee (\$)</td> <td>Small Entity</td> </tr> <tr> <td>52</td> <td>26</td> </tr> <tr> <td>220</td> <td>110</td> </tr> <tr> <td>390</td> <td>195</td> </tr> </table>								Fee (\$)	Small Entity	52	26	220	110	390	195				
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52	26																		
220	110																		
390	195																		
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims																			
<table border="1" style="width: 100%;"> <tr> <td>Total Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td>Multiple Dependent Claims</td> </tr> <tr> <td>16</td> <td>- 42 or HP</td> <td>x</td> <td>=</td> <td></td> </tr> </table>								Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	16	- 42 or HP	x	=			
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims															
16	- 42 or HP	x	=																
HP = highest number of total claims paid for, if greater than 20.																			
<table border="1" style="width: 100%;"> <tr> <td>Indep. Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> </tr> <tr> <td>2</td> <td>- 3 or HP</td> <td>x</td> <td>=</td> <td></td> <td></td> </tr> </table>								Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)	2	- 3 or HP	x	=		
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)														
2	- 3 or HP	x	=																
HP = highest number of independent claims paid for, if greater than 3.																			
3. APPLICATION SIZE FEE																			
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																			
<table border="1" style="width: 100%;"> <tr> <td>Total Sheets</td> <td>Extra Sheets</td> <td>Number of each additional 50 or fraction thereof</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> </tr> <tr> <td>- 100 =</td> <td>/50 =</td> <td>(round up to a whole number) x</td> <td>=</td> <td></td> </tr> </table>								Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	- 100 =	/50 =	(round up to a whole number) x	=			
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- 100 =	/50 =	(round up to a whole number) x	=																
4. OTHER FEE(S)																			
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2253 Extension for response within third month 310.00* 2801 Request for continued examination (RCE) (see 37 ... 405.00																			

SUBMITTED BY					
Signature	<i>James T. Eller, Jr.</i>		Registration No. (Attorney/Agent)	39,538	Telephone (703) 205-8000
Name (Print/Type)	James T. Eller, Jr. <i>CJM</i>		Date	December 22, 2009	

* An extension of two (2) months was previously requested and paid for on November 23, 2009 in the instant application. Thus, a fee of \$310.00 is required to obtain an additional two (2) month(s) extension.